MAR 0 5 2010

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450

Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

Size Page	25259 759	The break those the proce it							ded where address as RESS" for
IBM CORPORATION 3039 CORNWALLIS RD. DEPT. 181 / B503, PO BOX 12195 RESEARCH TRIANGLE PARK, NC 27709 APPLICATION NO. HLING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. Great Confirmation of the C		M)		Fee(s) Transmittal This certificate connect to confession mainings of the					
3039 CORNWALLIS RD. DEPT. T81 / B503, PO BOX 12195 RESEARCH TRIANGLE PARK, NC 27709 APPLICATION NO. HILING DATE FIRST NAMED INVENTIOR ATTOKINEY DOCKET NO. CONFIRMATION NO. PILING DATE OP/773,811 01/31/2001 David Aro Bruton III 5577-223 2267 TITLE OF INVENTION: METHODS, SYSTEMS AND COMPUTER PROGRAM PRODUCTS FOR SELECTIVES APPLICATION SUSPENSIVE FEE TOTAL FEE(SIDUE DATE DUE nonprovisional NO \$1510 \$300 \$0 \$1810 0.3008/2010 APPL. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(SIDUE DATE DUE nonprovisional NO \$1510 \$300 \$0 \$1810 0.3008/2010 EXAMINER ART UNIT CLASS-SUBCLASS 83/88/2818 SHOHRIRI B0808816 899861 890861 890861 890861 890861 890861 890861 890861 890868 80 \$1810 0.3008/2010 I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.553). (1) the names of up to 3 registered patent attorneys or agents 18 no name is 3 3.8SIGNEE NAME AND RESIDENCE COrrespondence Address 'indication for "Fee Address" Indication for "Fee Addres	IRMITADDAT	13012303			Car	difference of	Mallina		
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 99/773,811 01/31/2001 David Are Bruton III S577-223 2267 TITLE OF INVENTION: METHODS, SYSTEMS AND COMPUTER PROGRAM PRODUCTS FOR SELECTIVEES AND COMPUTER PROGRAM PRODUCTS FOR SELECTIVES AND COMPUTER PROGRAM PRODUCTS FO				1 h	ereby certify that th	is Fee(s)	Transmittal is being	mission g deposited with th	ne United
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 99/773,811 01/31/2001 David Are Bruton III S577-223 2267 TITLE OF INVENTION: METHODS, SYSTEMS AND COMPUTER PROGRAM PRODUCTS FOR SELECTIVEES AND COMPUTER PROGRAM PRODUCTS FOR SELECTIVES AND COMPUTER PROGRAM PRODUCTS FO	DEPT. T81 / B503.	PO BOX 12195		ado	tressed to the Mail	vith suffic Stop IS:	ient postage for fir. SUE FEE address	st class mail in an above, or being	envelope facsimile
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 99/713.811 01/31/2001 David Are Bruton III 5577-223 2267 TITLE OF INVENTION: METHODS, SYSTEMS AND COMPUTER PROGRAM PRODUCTS FOR SELECTIVELY ATTORNEY DOCKET NO. 11/2007 AULTI-USER SYSTEM ACCESS TO NETWORK RESOURCES APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1510 \$300 \$0 \$1810 03/08/2010 EXAMINER ART UNIT CLASS-SUBCLASS 63/68/2616 SH0HAMRI 66868816 698461 6974 161 TRUONG, LAN DAI T 2452 709-225000 81 FC:1581 1510.80 DA 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563.) CTR 1.563. Change of correspondence address (or Change of Correspondence Address) indication (or "Fee Address" Indication form PTO/SB1/22) attached. 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/ 0.1564 309.80 DA 2. For printing on the patent front page: 185/	RESEARCH TRIAN	NGLE PARK, NC 2	7709	tra.	nsmitted to the USP	TO (571)	273-2885, on the d	ate indicated helov	N.
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION N 09/173,811 01/31/2001 David Aro Bruton III 5577-223 2267 TITLE OF INVENTION: METHODS, SYSTEMS AND COMPUTER PROGRAM PRODUCTS FOR SELECTIVE NAMED WINST USERS OF A APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(SI DUE DATE DUE nonprovisional NO \$1510 \$300 \$0 \$51810 \$0.000/08/2010 EXAMINER ART UNIT CLASS-SUBCLASS \$93/68/2616 SHOHARM1 69696816 698461 8 TRUONG, LAN DAI T 2452 709-225000 897/67/1561 1518,86 DA 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1-363). Crg 1-363. 1. Change of correspondence address (or Chan		•		. -				(Deposi	tor's name)
O9/773,811 O1/31/2001 David Ard Bruton III S577-223 2267 TITLE OF INVENTION: METHODS, SYSTEMS AND COMPUTER MULTI-USER SYSTEM ACCESS TO NETWORK RESOURCES APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE DATE DUE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE DATE DUE TRUONG, LAN DAI T 2452 709-225000 81 FC:1581 1518.89 DA 1. Change of correspondence address or indication of "Fee Address" (37) Change of correspondence address of correspondence Address form PTO/SB/122) attached. The Correspondence address of indication form fee Address indication form form provision fee form provision form provision form provision form provision fe				 -			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	(Signature)
David Aro Bruton III 5577-223 2267 TITLE OF INVENTION: METHODS, SYSTEMS AND COMPUTER PROGRAM PRODUCTS FOR SELECTIVES AND SELECTIVES OF A APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1510 \$300 \$0 \$1810 03/08/2010 EXAMINER ART UNIT CLASS-SUBCLASS 63/68/2616 SHOHARHI 6866616 698461 69 TRUONG, LAN DAIT 2452 709-225000 61 FC:1561 1518, 86 DA 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 3. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PI.FASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE CITTY and STATE OR COUNTRY) Tinternational Business Machines Armonk, NY Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Govern	APPLICATION NO.	FILING DATE	1	FIRST NAMED INVENTO		ATTOPN	EV IVVIVETNO T	/V\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	(Date)
TITLE OF INVENTION: METHODS, SYSTEMS AND COMPUTER PROGRAM PRODUCTS FOR SELECTIVES ATCOMINESUSERS OF A MILITI-USER SYSTEM ACCESS TO NETWORK RESOURCES APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1510 \$300 \$0 \$1810 03/08/2010 EXAMINER ART UNIT CLASS-SUBCLASS 83/68/2616 SHOHAHHI 89898916 998461 8 TRUONG, LAN DAIT 2452 709-225000 81 FC:1581 1518.88 DA 1. Change of correspondence address or indication of "Fee Address" (37 CFR I.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 3. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 4. (2) the name of a single firm (having as a member a registered attorney or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agents) and the names of up to 2 registered patent attorneys or agents OR, alternatively. (3) The Address indication (or "Fee Address" Indication form PTO/SB/12: Provided attorney or agents OR, alternatively. (3) The Address indication (or "Fee Address" Indication form PTO/SB/12: Provided attorney or agents OR, alternatively. (3) The Address indication (or "Fee Address" Indication form PTO/SB/12: Provided attorney or agents OR, alternatively. (4) The Address indication (or "Fee Address" Indication form PTO/SB/12: Provided attorney or agents OR, alternatively. (5) The Address indication (or "Fee Address" Indication form PTO/SB/12: Provided attorney or agents OR, alternatively. (6) The Address indication form PTO/SB/12: Provided attorney or agents OR, alternatively. (7) The Address indication form PTO/SB/12: Provided attorney or agents OR, alternatively. (8) The Address indication form PTO/SB/12: Provided attorney or agents OR, alternatively. (9) The Address indication form PTO/SB/12: Provided attorney or agents OR and a set of the part of t	09/773,811	01/31/2001		David Am Rayon III		<u> </u>			I NO.
nonprovisional NO \$1510 \$300 \$0 \$1810 03/08/2010 EXAMINER ART UNIT CLASS-SUBCLASS 03/68/2010 \$MOHAMM1 00000016 090461 0 TRUONG, LAN DAI T 2452 709-225000 01 FC:1501 1510, 00 DA 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/122) attached. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) International Business Machines Armonk, NY Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the patent of the	TITLE OF INVENTION: MULTI-USER SYSTEM AC	AETHODS, SYSTEMS . CESS TO NETWORK R	AND COMPUTEI RESOURCES	R PROGRAM PRODUC	TS FOR SELECT	IVERSWA	1 111-111 1 111-111 1111-1111	2267 SS OF A	
EXAMINER ART UNIT CLASS-SUBCLASS B3/98/2010 SMOHAHM1 08000016 090461 0 TRUONG, LAN DAI T 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. CFR 1.463). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. CFR 1.363). ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PI.F.ASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee, is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) International Business Machines (A) Residence of the patent of the patent from type of printed on the patent. If an assignment of the patent of the patent of the patent. If an assignment of the patent of the patent. If an assignment of the patent of the patent. If an assignment of the patent of the patent of the patent. If an assignment of the patent of the patent. If an assignment of the patent of the patent. If an assignment of the patent of the patent. If an assignment of the patent of the patent of the patent. If an assignment of the patent of the patent of the patent of the patent of the patent. If an assignment of the patent of the paten	APPLN. TYPE S	MALL ENTITY IS	SSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE 1	TOTAL FEE(S) DITE	DATE DU	
EXAMINER ART UNIT CLASS-SUBCLASS 03/08/2010 SHOHAMFI 00000016 090461 0 TRUONG, LAN DAI T 2452 709-225000 01 FC:1501 1510.00 DA 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The name of a single firm (having as a member a registered attorneys or agent) and the names of up to 2 registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agent. If no name is listed, no name will be printed. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) International Business Machines Armonk, NY Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): A Payment of Eco(a) (Please first as a state of the patent attorney or agent attorneys or agent	nonprovisional	NO .	\$1510	\$300	\$0				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. C'Free Address form Pto/SB/122 attached. C'Free Address	EXAMINER		ART UNIT	CLASS-SUBCLASS	ASS-SUBCLASS 03/08/2010 SMO				.o 0977381:
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form pto/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form pto/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form pto/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form pto/SB/122) attached. Change of correspondence address for the patent attorney or agent attorney or agent attorney or agent and the names of up to a single firm (having as a member a registered attorney or agent) and the names of up to a gent attorney or agent attorney or age							1510.00	DA	
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PI.EASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) International Business Machines Armonk, NY Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Govern: 4b. Payment of Eco(a) (Please fine).	CI K 1.303).			2. For printing on the	patent front page, lis	C:1584	300.00	DA	
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) International Business Machines Armonk, NY Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Govern: 4b. Payment of Ecolor (Please fine).	Change of corresponder	ace address (or Change of	Correspondence	(1) the names of up to or agents OR, alternati	 3 registered patent vely, 	attorneys	, I <u></u>		
PLASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) International Business Machines Armonk, NY Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Govern: 4a. The following fee(s) are submitted:	"Fee Address" indication (or "Fee Address" Indication form			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is					
PLASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) International Business Machines Armonk, NY Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Govern: 4a. The following fee(s) are submitted:	3. ASSIGNEE NAME AND R	ESIDENCE DATA TO F	BE PRINTED ON T	THE PATENT (print or ty	pe)				
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) International Business Machines Armonk, NY Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Govern: 4a. The following fee(s) are submitted:	PLEASE NOTE: Unless as	m manimana in identificati				e is identi	ified helow, the do	cument has been i	filed for
Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Govern: 4a. The following fee(s) are submitted:									
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of Fee(s) (Place for the patent).	International	Business Mac	hines	Armonk, N	Y	JUNIKI	,		
4a. The following fee(s) are submitted: 4b. Payment of Fee(s) (Place Fee)									
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Place feet)	Please check the appropriate as	signee category or catego	ories (will not be pri	inted on the patent):	Individual 😡 Cor	poration o	or other private grou	ip entity Gove	2mment
	a. The following fee(s) are sul	bmitted:	4b						
A check is enclosed.	Issue Fee			A check is enclosed.				down above,	
Publication Fee (No small entity discount permitted) Advance Orders # of Cosics Payment by credit card, Form PTO-2038 is attached.	Advance Order - # of Copies			Payment by credit card. Form PTO-2038 is attached.					
overpayment, to Deposit Account Number 09-0461 (organization of the any				The Director is hereby overpayment, to Depo	authorized to charg sit Account Number	09-02	ired fee(s), any defi 46 l (enclose an	ciency, or credit ar	ny Form
a. Applicant claims SMALL ENTITY status, See 37 CFR 1.27. Dh. Applicant is no loggest claims SMALL ENTITY status, See 37 CFR 1.27.	■ a. Applicant claims SMA	LL ENTITY status, See	e) 37 CFR 1.27.	Dib Applicant is no lone	rag alai—i— Cheat t	The foreign			
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other par nterest as shown by the records of the United States Patent and Trademark Office.	OTE: The Issue Fee and Publi aterest as shown by the records	ication Fee (if required) vs of the United States Pate	vill not be accepted	from anyone other than the	ne applicant; a regist	ered attorn	ney or agent; or the	assignee or other i	party in
Authorized Signature		Mi	M	Onic.					
Typed or printed name Joseph E. Bracken Registration No 56 166		Joseph F Pro		 .					
his collection of information	Typed or printed name								
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to procupe the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the first public which is to file (and by the USPTO to procupe the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the complete that the procupe the complete is the complete that the complete the complete that the complete t	his collection of inf	comired by 37 CED 1 21) is reallissed to obtain or w	tain a benefit by the	outhlin mi	high is to Alle / and b	1 110000	mcess)
Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.	his collection of information in n application. Confidentiality i abmitting the completed applic its form and/or suggestions for ox 1450, Alexandria, Virginia lexandria, Virginia 22313-145	r reducing this hurden, she 22313-1450. DO NOT S	O. Time will vary of could be sent to the SEND FEES OR C	depending upon the indivi Chief Information Officer OMPLETED FORMS TO	dual case. Any com , U.S. Patent and Tr THIS ADDRESS.	ments on rademark SEND TO	the amount of time Office. U.S. Depart Commissioner for	e you require to co ment of Commerc r Patents, P.O. Box	ng, and implete c, P.O.